

PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notification.

Checklist CORRESPONDENCE ADDRESSES (from the Block 1 for any change of address)

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Sandee Hampton	Certification Number
/Sandee Hampton/	Signature
December 17, 2009	Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/317,843	07/12/2009	Greg Swords	37370-339252 (0209)	9998

TITLE OF INVENTION: CRANIO-ALIAL IMPLANT

APPL. TYPE	SMALL ENTITY?	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/11/2010

EXAMINER	ART UNIT	CLASS/SECTION
GANESAN, SUBRA	3774	623-017180

1. Change of correspondence address or indication of "Fee Address" (PTO Form 1.93)

☐ Change of correspondence address (see Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication for "Fee Address" indication form PTO/SB/122 Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent from page 1st Kilpatrick Stockton LLP

(1) the names of up to 3 registered patent attorneys or agents; OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNOR NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless, an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 1.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNOR: **Porrex Surgical, Inc.**

(B) RESIDENCE (CITY AND STATE OR COUNTRY): **Newnan, Georgia**

Please check the appropriate assignee category or categories (will not be printed on the patent). ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue fee

☐ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies: _____

4b. Payment of fee(s). (Please first reapply any previously paid issue fee shown above)

☐ A check is enclosed.

☐ Payment by credit card. Form PTO-2098 is attached.

☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to deposit Account Number **110255**, (enclose an extra copy of this form)

5. Change in Entity Status (from status indicated above)

☐ A. Applicant claim SMALL ENTITY status. See 37 CFR 1.27.

☐ B. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(b)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party to interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature: *Kristin M. Crail* Date: December 17, 2009

Typed or printed name: Kristin M. Crail Registration No.: 46,895

This collection of information is required by 37 CFR 1.31. The information is required to obtain or retain a benefit by the public which is in the file (and by the USPTO to process an application). Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 15 minutes to complete, including gathering, preparing, and submitting the completed application to the USPTO. Time will vary depending upon the individual case. Any comment on the amount of time you require to complete the form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, 1750 Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND PAPER OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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